

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

PROTECTIVE LIFE CORPORATION FEDERAL PAC

ADDRESS (number and street) ▼

P.O. BOX 2606

☐ Check if different than previously reported. (ACC)

BIRMINGHAM

AL

35202

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00161414

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☒ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
08 01 2016

through

M M / D D / Y Y Y Y Y Y
08 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer STEVEN WALKER

Signature of Treasurer

STEVEN WALKER

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
09 01 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 08 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y 08 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		125422.49
(b) Cash on Hand at Beginning of Reporting Period.....	110834.01	
(c) Total Receipts (from Line 19)	4902.64	53314.16
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	115736.65	178736.65
7. Total Disbursements (from Line 31)	2500.00	65500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	113236.65	113236.65
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
08 01 2016

To:

M M / D D / Y Y Y Y Y
08 31 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

4785.22

45382.48

(ii) Unitemized

117.42

7931.68

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

4902.64

53314.16

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

4902.64

53314.16

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ►

4902.64

53314.16

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

4902.64

53314.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	65500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2500.00	65500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	65500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4902.64	53314.16
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4902.64	53314.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. MALCOLM BARTLETT

Mailing Address 3155 PINE RIDGE ROAD

City State Zip Code
 BIRMINGHAM AL 35213

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP CORPORATE ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : B002857S000001L11A1

Amount of Each Receipt this Period

50.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. MALCOLM BARTLETT

Mailing Address 3155 PINE RIDGE ROAD

City State Zip Code
 BIRMINGHAM AL 35213

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP CORPORATE ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : B002860S000001L11A1

Amount of Each Receipt this Period

50.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. LANCE BLACK

Mailing Address 1817 SURREY OAKS LANE

City State Zip Code
 VESTAVIA AL 35243

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP, TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : B002857S000002L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. LANCE BLACK

Mailing Address 1817 SURREY OAKS LANE

City State Zip Code
 VESTAVIA AL 35243

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP, TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000002L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. EDNA BOATRIGHT

Mailing Address 3408 TAL HEIM CIRCLE

City State Zip Code
 BIRMINGHAM AL 35216

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP CUSTOMER RELATIONSHIP MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000003L11A1

Amount of Each Receipt this Period

50.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. EDNA BOATRIGHT

Mailing Address 3408 TAL HEIM CIRCLE

City State Zip Code
 BIRMINGHAM AL 35216

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP CUSTOMER RELATIONSHIP MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000003L11A1

Amount of Each Receipt this Period

50.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. STEVE CALLAWAY

Mailing Address 2900 REDMONT PARK CIRCLE, #501W

City	State	Zip Code
BIRMINGHAM	AL	35205

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SENIOR ASSOCIATE COUNSEL, SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1541.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

Transaction ID : B002857S000005L11A1

Amount of Each Receipt this Period

97.12

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. STEVE CALLAWAY

Mailing Address 2900 REDMONT PARK CIRCLE, #501W

City	State	Zip Code
BIRMINGHAM	AL	35205

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SENIOR ASSOCIATE COUNSEL, SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1541.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	6

Transaction ID : B002860S000005L11A1

Amount of Each Receipt this Period

97.12

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. GREGG CARIOLANO

Mailing Address 5200 AUTUMNWINDS DR.

City	State	Zip Code
ST. LOUIS	MO	63129

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP, FINANCIAL OFFICE APD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

Transaction ID : B002857S000006L11A1

Amount of Each Receipt this Period

35.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

229.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. GREGG CARIOLANO

Mailing Address 5200 AUTUMNWINDS DR.

City

ST. LOUIS

State

MO

Zip Code

63129

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP, FINANCIAL OFFICE APD

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000006L11A1

Amount of Each Receipt this Period

35.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. VINCENT CIRULLI

Mailing Address 2350 MONTEVALLO ROAD, APT 1204

City

BIRMINGHAM

State

AL

Zip Code

35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP DERIVATIVE VA HEDGING

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000007L11A1

Amount of Each Receipt this Period

15.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. VINCENT CIRULLI

Mailing Address 2350 MONTEVALLO ROAD, APT 1204

City

BIRMINGHAM

State

AL

Zip Code

35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP DERIVATIVE VA HEDGING

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000007L11A1

Amount of Each Receipt this Period

15.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

65.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA COBB

Mailing Address 4206 PAXTON PLACE

City
VESTAVIA

State Zip Code
AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

2VP, CASH MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000008L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. PATRICIA COBB

Mailing Address 4206 PAXTON PLACE

City
VESTAVIA

State Zip Code
AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

2VP, CASH MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000008L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. KATE COTTON

Mailing Address 3412 SPRINGHILL ROAD

City
BIRMINGHAM

State Zip Code
AL 35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

VP COMMUNITY RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000009L11A1

Amount of Each Receipt this Period

75.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. KATE COTTON

Mailing Address 3412 SPRINGHILL ROAD

City State Zip Code
BIRMINGHAM AL 35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

VP COMMUNITY RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000009L11A1

Amount of Each Receipt this Period

75.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. MARK CYPHERT

Mailing Address 200 HALLMAN HILL #105

City State Zip Code
HOMEWOOD AL 35209

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP, CHIEF INFO OPS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000010L11A1

Amount of Each Receipt this Period

20.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. MARK CYPHERT

Mailing Address 200 HALLMAN HILL #105

City State Zip Code
HOMEWOOD AL 35209

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP, CHIEF INFO OPS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000010L11A1

Amount of Each Receipt this Period

20.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. ANTHONY GREEN

Mailing Address 4114 TERNVIEW ROAD

City
VESTAVIA

State Zip Code
AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

VP & ACTUARY, ERM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000012L11A1

Amount of Each Receipt this Period

30.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. ANTHONY GREEN

Mailing Address 4114 TERNVIEW ROAD

City
VESTAVIA

State Zip Code
AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

VP & ACTUARY, ERM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : B002860S000012L11A1

Amount of Each Receipt this Period

30.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. WADE HARRISON

Mailing Address 2 ABBEY LANE

City
BIRMINGHAM

State Zip Code
AL 35226

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

SVP, CHIEF PRODUCT ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000014L11A1

Amount of Each Receipt this Period

21.25

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. WADE HARRISON

Mailing Address 2 ABBEY LANE

City State Zip Code
 BIRMINGHAM AL 35226

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

SVP, CHIEF PRODUCT ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : B002860S000014L11A1

Amount of Each Receipt this Period

21.25

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. BRUCE HEEN

Mailing Address 4004 MILNER WAY

City State Zip Code
 BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP DIVISION CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : B002857S000015L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. BRUCE HEEN

Mailing Address 4004 MILNER WAY

City State Zip Code
 BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP DIVISION CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : B002860S000015L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. DERRY HERRING

Mailing Address 6123 EAGLE POINT CIRCLE

City State Zip Code
 BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PROTECTIVE LIFE CORPORATION

Occupation
 SVP, CHIEF AUDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2429.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : B002857S000016L11A1

Amount of Each Receipt this Period

153.12

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. DERRY HERRING

Mailing Address 6123 EAGLE POINT CIRCLE

City State Zip Code
 BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PROTECTIVE LIFE CORPORATION

Occupation
 SVP, CHIEF AUDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2429.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : B002860S000016L11A1

Amount of Each Receipt this Period

153.12

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. CHARLOTTE JONES

Mailing Address 6005 LAKESIDE DRIVE

City State Zip Code
 MT OLIVE AL 35117

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PROTECTIVE LIFE INSURANCE COMPANY

Occupation
 2VP INFORMATION SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : B002857S000018L11A1

Amount of Each Receipt this Period

21.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

327.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. CHARLOTTE JONES

Mailing Address 6005 LAKESIDE DRIVE

City State Zip Code
 MT OLIVE AL 35117

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 PROTECTIVE LIFE INSURANCE COMPANY 2VP INFORMATION SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 31 2016

Transaction ID : B002860S000018L11A1

Amount of Each Receipt this Period

21.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. MARSHALL KARCHUNAS

Mailing Address 14814 BROOKHAVEN PLACE

City State Zip Code
 CHESTERFIELD MO 63017

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 PROTECTIVE LIFE INSURANCE COMPANY SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1191.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 15 2016

Transaction ID : B002857S000019L11A1

Amount of Each Receipt this Period

75.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. MARSHALL KARCHUNAS

Mailing Address 14814 BROOKHAVEN PLACE

City State Zip Code
 CHESTERFIELD MO 63017

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 PROTECTIVE LIFE INSURANCE COMPANY SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1191.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 31 2016

Transaction ID : B002860S000019L11A1

Amount of Each Receipt this Period

75.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. **MATTHEW KOHLER**

Mailing Address 2840 OVERTON ROAD

City

BIRMINGHAM

State

AL

Zip Code

35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP CHIEF TECHNOLOGY OFFICER

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : B002857S000020L11A1

Amount of Each Receipt this Period

51.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. **MATTHEW KOHLER**

Mailing Address 2840 OVERTON ROAD

City

BIRMINGHAM

State

AL

Zip Code

35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP CHIEF TECHNOLOGY OFFICER

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : B002860S000020L11A1

Amount of Each Receipt this Period

51.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. **MICHAEL KORTHAUS**

Mailing Address 889 MIAMI RIDGE DRIVE

City

LOVELAND

State

OH

Zip Code

45140

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP NATIONAL ACCOUNTS

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : B002857S000021L11A1

Amount of Each Receipt this Period

30.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

132.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL KORTHAUS

Mailing Address 889 MIAMI RIDGE DRIVE

City
LOVELAND

State Zip Code
OH 45140

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP NATIONAL ACCOUNTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000021L11A1

Amount of Each Receipt this Period

30.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. JESSICA KUBAT

Mailing Address 1207 31ST STREET SOUTH

City
BIRMINGHAM

State Zip Code
AL 35205

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

2VP ASSOCIATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000022L11A1

Amount of Each Receipt this Period

21.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. JESSICA KUBAT

Mailing Address 1207 31ST STREET SOUTH

City
BIRMINGHAM

State Zip Code
AL 35205

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

2VP ASSOCIATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000022L11A1

Amount of Each Receipt this Period

21.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. FRANK LASSITER

Mailing Address 3317 FARING ROAD

City

BIRMINGHAM

State

AL

Zip Code

35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP ACQUISITION AND CAPITAL MARKE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000023L11A1

Amount of Each Receipt this Period

23.74

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. FRANK LASSITER

Mailing Address 3317 FARING ROAD

City

BIRMINGHAM

State

AL

Zip Code

35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP ACQUISITION AND CAPITAL MARKE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : B002860S000023L11A1

Amount of Each Receipt this Period

23.74

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. DEBORAH LONG

Mailing Address 3576 SHANDWICK PLACE

City

BIRMINGHAM

State

AL

Zip Code

35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

EVP CHIEF LEGAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000025L11A1

Amount of Each Receipt this Period

210.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

257.48

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 36

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH LONG

Mailing Address 3576 SHANDWICK PLACE

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

EVP CHIEF LEGAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3360.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : B002860S000025L11A1

Amount of Each Receipt this Period

210.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. DAVID LOPER

Mailing Address 1300 27TH PLACE SOUTH #32

City	State	Zip Code
BIRMINGHAM	AL	35205

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SR ASSOCIATE COUNSEL, SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : B002857S000026L11A1

Amount of Each Receipt this Period

21.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. DAVID LOPER

Mailing Address 1300 27TH PLACE SOUTH #32

City	State	Zip Code
BIRMINGHAM	AL	35205

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SR ASSOCIATE COUNSEL, SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : B002860S000026L11A1

Amount of Each Receipt this Period

21.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

252.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM MCMULLEN

Mailing Address 2556 WHETSTONE ROAD

City State Zip Code
BIRMINGHAM AL 35243

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROTECTIVE LIFE INSURANCE COMPANY

Occupation
VP CORPORATE ACCOUNTING & BPI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.28

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000028L11A1

Amount of Each Receipt this Period

27.58

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. WILLIAM MCMULLEN

Mailing Address 2556 WHETSTONE ROAD

City State Zip Code
BIRMINGHAM AL 35243

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROTECTIVE LIFE INSURANCE COMPANY

Occupation
VP CORPORATE ACCOUNTING & BPI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.28

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000028L11A1

Amount of Each Receipt this Period

27.58

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. JENNEFER MEYER

Mailing Address 105 GRAND COVE PLACE

City State Zip Code
MADISON AL 35758

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROTECTIVE LIFE INSURANCE COMPANY

Occupation
VP COMMUNICATIONS & SOC ENGMNT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000030L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.16

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. JENNEFER MEYER

Mailing Address 105 GRAND COVE PLACE

City
MADISON

State Zip Code
AL 35758

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP COMMUNICATIONS & SOC ENGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000030L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. LORI OSWALD

Mailing Address 303 LE JEUNE WAY

City
BIRMINGHAM

State Zip Code
AL 35209

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP CORPORATE ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000031L11A1

Amount of Each Receipt this Period

45.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. LORI OSWALD

Mailing Address 303 LE JEUNE WAY

City
BIRMINGHAM

State Zip Code
AL 35209

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP CORPORATE ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000031L11A1

Amount of Each Receipt this Period

45.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. ARTHUR OWENS

Mailing Address 104 LONGRIDGE DRIVE

City State Zip Code
ALEXANDRIA KY 41001

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

ANNUITY DSD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000032L11A1

Amount of Each Receipt this Period

25.31

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. ARTHUR OWENS

Mailing Address 104 LONGRIDGE DRIVE

City State Zip Code
ALEXANDRIA KY 41001

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

ANNUITY DSD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : B002860S000032L11A1

Amount of Each Receipt this Period

25.31

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. PHILIP PASSAFIUME

Mailing Address 1033 LAKE COLONY LANE

City State Zip Code
BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP DIR FIXED INCOME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000033L11A1

Amount of Each Receipt this Period

18.75

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.37

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. PHILIP PASSAFIUME

Mailing Address 1033 LAKE COLONY LANE

City State Zip Code
BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP DIR FIXED INCOME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000033L11A1

Amount of Each Receipt this Period

18.75

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. CHANDRASEKHAR PISUPATI

Mailing Address 3093 BROOKHILL DRIVE

City State Zip Code
BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP CREDIT AND MKT RISK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000034L11A1

Amount of Each Receipt this Period

75.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. CHANDRASEKHAR PISUPATI

Mailing Address 3093 BROOKHILL DRIVE

City State Zip Code
BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP CREDIT AND MKT RISK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000034L11A1

Amount of Each Receipt this Period

75.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

168.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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PAGE 24 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. EVA ROBERTSON

Mailing Address 1322 ANGLEWOOD CIRCLE

City State Zip Code
BIRMINGHAM AL 35216

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

VP, CORPORATE COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000035L11A1

Amount of Each Receipt this Period

42.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. EVA ROBERTSON

Mailing Address 1322 ANGLEWOOD CIRCLE

City State Zip Code
BIRMINGHAM AL 35216

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

VP, CORPORATE COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000035L11A1

Amount of Each Receipt this Period

42.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. JOHN SAWYER

Mailing Address 2619 W LEGENDARY RUN

City State Zip Code
CINCINNATI OH 45245

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

SVP LIFE AND ANNUITY EXEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2090.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000036L11A1

Amount of Each Receipt this Period

175.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

259.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 25 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. JOHN SAWYER

Mailing Address 2619 W LEGENDARY RUN

City State Zip Code
 CINCINNATI OH 45245

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 PROTECTIVE LIFE INSURANCE COMPANY SVP LIFE AND ANNUITY EXEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2090.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000036L11A1

Amount of Each Receipt this Period

175.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. BRIAN SCHUCH

Mailing Address 351 MARHIL COURT

City State Zip Code
 CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 PROTECTIVE LIFE INSURANCE COMPANY SVP PROGRAM MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.44

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000037L11A1

Amount of Each Receipt this Period

20.84

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. BRIAN SCHUCH

Mailing Address 351 MARHIL COURT

City State Zip Code
 CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 PROTECTIVE LIFE INSURANCE COMPANY SVP PROGRAM MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.44

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000037L11A1

Amount of Each Receipt this Period

20.84

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

216.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. AARON SEURKAMP

Mailing Address 8504 IVY TRAILS DRIVE

City State Zip Code
CINCINNATI OH 45244

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
PROTECTIVE LIFE INSURANCE COMPANY SVP CHIEF SALES OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000038L11A1

Amount of Each Receipt this Period

40.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. AARON SEURKAMP

Mailing Address 8504 IVY TRAILS DRIVE

City State Zip Code
CINCINNATI OH 45244

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
PROTECTIVE LIFE INSURANCE COMPANY SVP CHIEF SALES OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000038L11A1

Amount of Each Receipt this Period

40.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. MARY SIMMONS

Mailing Address 135 CR 812

City State Zip Code
HEFLIN AL 36264

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
PROTECTIVE LIFE INSURANCE COMPANY VP ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000039L11A1

Amount of Each Receipt this Period

27.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. MARY SIMMONS

Mailing Address 135 CR 812

City State Zip Code
 HEFLIN AL 36264

FEC ID number of contributing federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

VP ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : B002860S000039L11A1

Amount of Each Receipt this Period

27.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. FRANK SOTTOSANTI

Mailing Address 2000 MAGNOLIA RIDGE

City State Zip Code
 BIRMINGHAM AL 35243

FEC ID number of contributing federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

SR VP & CHIEF MARKETING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : B002857S000041L11A1

Amount of Each Receipt this Period

105.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. FRANK SOTTOSANTI

Mailing Address 2000 MAGNOLIA RIDGE

City State Zip Code
 BIRMINGHAM AL 35243

FEC ID number of contributing federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

SR VP & CHIEF MARKETING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : B002860S000041L11A1

Amount of Each Receipt this Period

105.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶

237.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. BARRIE STOKES

Mailing Address 2102 MARKCLIFF CIRCLE

City State Zip Code
BIRMINGHAM AL 35216

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP SR ASSOCIATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000042L11A1

Amount of Each Receipt this Period

15.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. BARRIE STOKES

Mailing Address 2102 MARKCLIFF CIRCLE

City State Zip Code
BIRMINGHAM AL 35216

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

SVP SR ASSOCIATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000042L11A1

Amount of Each Receipt this Period

15.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. WAYNE STUENKEL

Mailing Address 2120 WOODLARK LANE

City State Zip Code
BIRMINGHAM AL 35216

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

SR VICE PRESIDENT, CHIEF ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2785.52

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000043L11A1

Amount of Each Receipt this Period

174.94

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

204.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 36
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. WAYNE STUENKEL

Mailing Address 2120 WOODLARK LANE

City State Zip Code
BIRMINGHAM AL 35216

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

SR VICE PRESIDENT, CHIEF ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2785.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : B002860S000043L11A1

Amount of Each Receipt this Period

174.94

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. MICHAEL SULLIVAN

Mailing Address 1033 MILLSTONE ROAD

City State Zip Code
LEEDS AL 35094

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

2VP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000044L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. MICHAEL SULLIVAN

Mailing Address 1033 MILLSTONE ROAD

City State Zip Code
LEEDS AL 35094

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

2VP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : B002860S000044L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

224.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. CARL THIGPEN

Mailing Address 2725 LOCKERBIE CIRCLE

City State Zip Code
MOUNTAIN BROOK AL 35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

EVP CHIEF INVESTMENT OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000045L11A1

Amount of Each Receipt this Period

80.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. CARL THIGPEN

Mailing Address 2725 LOCKERBIE CIRCLE

City State Zip Code
MOUNTAIN BROOK AL 35223

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

EVP CHIEF INVESTMENT OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : B002860S000045L11A1

Amount of Each Receipt this Period

80.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. EDWARD THOMPSON

Mailing Address 1407 SUTHERLAND PLACE

City State Zip Code
HOMEWOOD AL 35209

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

VICE PRESIDENT, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000046L11A1

Amount of Each Receipt this Period

41.67

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

201.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. EDWARD THOMPSON

Mailing Address 1407 SUTHERLAND PLACE

City State Zip Code
HOMEWOOD AL 35209

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROTECTIVE LIFE CORPORATION

Occupation
VICE PRESIDENT, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : B002860S000046L11A1

Amount of Each Receipt this Period

41.67

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. CATRINA TRIMM

Mailing Address 6321 WILDWOOD VALLEY DRIVE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROTECTIVE LIFE INSURANCE COMPANY

Occupation
DIR I PROJECTS AND SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : B002857S000047L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. CATRINA TRIMM

Mailing Address 6321 WILDWOOD VALLEY DRIVE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROTECTIVE LIFE INSURANCE COMPANY

Occupation
DIR I PROJECTS AND SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : B002860S000047L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. GEORGE VOGEL

Mailing Address 330 W 4TH STREET, #17

City State Zip Code
CINCINNATI OH 45202

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROTECTIVE LIFE INSURANCE COMPANY

Occupation
HYBRID WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000048L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. GEORGE VOGEL

Mailing Address 330 W 4TH STREET, #17

City State Zip Code
CINCINNATI OH 45202

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROTECTIVE LIFE INSURANCE COMPANY

Occupation
HYBRID WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000048L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. MATTHEW VOVK

Mailing Address 9853 JANE COURT

City State Zip Code
CINCINNATI OH 45241

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROTECTIVE LIFE INSURANCE COMPANY

Occupation
AVP PRODUCT MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000049L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. MATTHEW VOVK

Mailing Address 9853 JANE COURT

City
CINCINNATI

State Zip Code
OH 45241

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

AVP PRODUCT MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000049L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. STEVEN WALKER

Mailing Address 1517 HIGHLAND LAKES TRAIL

City
BIRMINGHAM

State Zip Code
AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

EXECUTIVE VP, CFO & CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3223.00

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000050L11A1

Amount of Each Receipt this Period

200.00

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. STEVEN WALKER

Mailing Address 1517 HIGHLAND LAKES TRAIL

City
BIRMINGHAM

State Zip Code
AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

EXECUTIVE VP, CFO & CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3223.00

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000050L11A1

Amount of Each Receipt this Period

223.00

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

448.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. MATTHEW WEBER

Mailing Address 5800 VALLEY PARK DRIVE

City
LOUISVILLE

State Zip Code
KY 40299

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

DIVISIONAL SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.20

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000051L11A1

Amount of Each Receipt this Period

26.20

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. MATTHEW WEBER

Mailing Address 5800 VALLEY PARK DRIVE

City
LOUISVILLE

State Zip Code
KY 40299

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

DIVISIONAL SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.20

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000051L11A1

Amount of Each Receipt this Period

26.20

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. PAUL WELLS

Mailing Address 2550 GENOA WAY, APT 211

City
BIRMINGHAM

State Zip Code
AL 35243

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

SVP AND CFO LAD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.20

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000052L11A1

Amount of Each Receipt this Period

24.70

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. PAUL WELLS

Mailing Address 2550 GENOA WAY, APT 211

City State Zip Code
 BIRMINGHAM AL 35243

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE INSURANCE COMPANY

Occupation

SVP AND CFO LAD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.20

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000052L11A1

Amount of Each Receipt this Period

24.70

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. CHARLES WINDHAM

Mailing Address 312 RICHMAR DRIVE

City State Zip Code
 BIRMINGHAM AL 35213

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

VP INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.24

Date of Receipt

08 / 15 / 2016

Transaction ID : B002857S000053L11A1

Amount of Each Receipt this Period

17.89

☐ Memo Item

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. CHARLES WINDHAM

Mailing Address 312 RICHMAR DRIVE

City State Zip Code
 BIRMINGHAM AL 35213

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROTECTIVE LIFE CORPORATION

Occupation

VP INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.24

Date of Receipt

08 / 31 / 2016

Transaction ID : B002860S000053L11A1

Amount of Each Receipt this Period

17.89

☐ Memo Item

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

60.48

TOTAL This Period (last page this line number only)..... ►

4785.22

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. TIM SCOTT FOR SENATE

Mailing Address 1405 ASHLEY RIVER ROAD

City	State	Zip Code
CHARLESTON	SC	29407

Purpose of Disbursement
FUNDRAISER

011

Category/
Type

Candidate Name

TIMOTHY E SCOTT

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: SC

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : B002859S000001L23

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2500.00

2500.00